IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

UTILITY PATENT APPLICATION TRANSMITTAL FORM (only for new nonprovisional applications under 37 CFR 1.53(b)

COMMISSIONER FOR PATENTS

BOX: PATENT APPLICATION

Washington, D.C. 20231

SIR:

18

Transmitted herewith for filing is the patent application (including Specification, Claims, and Abstract, 48 pages) of:

Inventor(s): Paul Kostyniak and Ross Giese

For : NOVEL PHARMACEUTICAL FORMULATION TO LIMIT OR DELAY
SUPEACE APPORTUNI

SURFACE ABSORPTION

**If a CONTINUING APPLICATION, please mark where appropriate and supply the req	uisite
information below and in a preliminary amendment:	
[] Continuation [] Divisional [] Continuation-In-Part (CIP)	

Prior application information: Examiner:	of prior application Serial No.	() () () ()
Art I /wit ·	Prior application information:	Examiner : Art Unit :

application (1.63(d) (for continuation/divisional).

Enclosed are:

[]

[A]	11	sneets	01	imformai	urawings.	

[]	Copy of signed Combined Declaration and Power of Attorney (_ pages) from a prior

Signed Combined Declaration and Power of Attorney (pages).

[]	Signed statement deleting inventor(s) named in prior application (pages) (1.63(d)(2) and
	1.33(b)).	

[]	Incorporation By Reference: The entire disclosure of the prior application, from which a copy
	of the oath or declaration is supplied herewith, is considered as being part of the disclosure of the
	enclosed application and is hereby incorporated by reference therein.

[]	Assignment (pages) of the invention to	
----	--------------	----------------------------	--

ſ	1	Assignment	Transmittal	Letter.
---	---	------------	-------------	---------

- [] Certified copy of a foreign priority document.
- [] Associate power of attorney.
- [X] Applicant claims small entity status. (See 37 CFR 1.27.)

the state of the s

EXPRESS MAIL NO.: EL710758148US

ND TRADEMARK OFFICE

TRANSMITTAL FORM

DOCKET NO.: 19226/2091 (R-5629)

[]	Preliminary Amendment (pages).
[]	Information Disclosure Statement, form PTO-1449 (pages) and references.
[X]	<u>UNSIGNED</u> Combined Declaration and Power of Attorney (2 pages).
[]	Statement in Accordance with 37 CFR § 1.821(f) and computer readable 3.5" Diskette.
[X]	A self-addressed, prepaid postcard acknowledging receipt.
[]	Other:

The Filing fee has been calculated as shown below:

	(Col. 1)	(Col. 2)		
FOR:	NO. FILED	NO. EXTRA		
BASIC FEE	XXXXXXX	XXXXXXX		
TOTAL CLAIMS	56 - 20 =	36		
INDEP CLAIMS 5 - 3 = 2				
[] MULTIPLE DEPENDENT CLAIM PRESENTED				

^{*}If the Total Claims are less than 20 and Indep. Claims are less than 3, enter "0" in Col. 2

	SMALL E	ENTITY	_	LARGE I	ENTITY
	RATE	FEE	<u>OR</u>	RATE	FEE
	XXXX	\$370	<u>OR</u>	XXXX	\$740
	x 9=	\$324	<u>OR</u>	x 18=	\$
	x 42=	\$ 84	<u>OR</u>	X84 =	\$
	x140 =	\$	<u>OR</u>	x280=	\$
٠	TOTAL	\$778	<u>OR</u>	TOTAL	\$

- [X] A check in the amount of \$778.00 to cover the filing fee is enclosed.
- The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 14-1138. A duplicate copy of this sheet is enclosed.
- [X] Address all future communications to:

Michael L. Goldman NIXON PEABODY LLP Clinton Square, P.O. Box 31051 Rochester, New York 14603

Date: October 18, 2001

Registration No. 44,597

NIXON PEABODY LLP Clinton Square, P.O. Box 31051 Rochester, New York 14603 Telephone: (716) 263-1672 Facsimile: (716) 263-1600

R529247.1

EXPRESS MAIL CERTIFICATE

DOCKET NO. : 19226/2091 (R-5629)

APPLICANT(S): Paul Kostyniak and Ross Giese

TITLE : NOVEL PHARMACEUTICAL FORMULATION TO LIMIT OR

DELAY SURFACE ABSORPTION

Certificate is attached to the **Utility Patent Application Transmittal Form** (2 pages) (in duplicate) of the above-named application.

"EXPRESS MAIL" NUMBER: EL710758148US

DATE OF DEPOSIT: October 18, 2001

I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Commissioner for Patents, Washington, D.C. 20231, **Box Patent Application**.

Sherri A. Moscato
(Typed or printed name of person mailing paper or fee)

(Signature of person mailing paper or fee)